

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers) 00000001	2 PAGE # 1 of 22
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Mr. Amadeo		OFFICE USE ONLY  Date Received  Date Hand-delivered or Date Posted  Receipt # Amount Date Processed Date Imaged
	NICKNAME LAST SUFFIX Ortiz		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1443 W. Elsmere San Antonio, TX 78201		<div style="writing-mode: vertical-rl; transform: rotate(180deg);">             FILED IN MY OFFICE              JACQUELYN F. CALLANEN              ELECTIONS ADMINISTRATOR              BEXAR COUNTY           </div>
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mrs. Belinda		
	NICKNAME LAST SUFFIX Dovalina		
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 9311 Moonlit Glade Helotes, TX 78023		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (210) 254-3436		
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
9 PERIOD COVERED	Month Day Year    THROUGH    Month Day Year 07/01/2009    12/31/2009		
10 ELECTION	ELECTION DATE    ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (If any) Bexar County Sheriff		12 OFFICE SOUGHT (If known)
13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS  <input type="checkbox"/> additional pages	.. Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ..		
	Name		
	Address/PO Box; Apt. / Suite #; City; State; Zip Code		

**GO TO PAGE 2**

**CANDIDATE / OFFICEHOLDER REPORT:  
SUPPORT & TOTALS****FORM C/OH  
COVER SHEET PG 2****14 C/OH NAME** Ortiz, Amadeo (Mr.)**15 ACCOUNT #** (Ethics Commission filers)  
00000001**16 NOTICE  
FROM  
POLITICAL  
COMMITTEE(S)**

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

**COMMITTEE TYPE****COMMITTEE NAME**☐ **GENERAL****COMMITTEE ADDRESS**☐ **SPECIFIC****COMMITTEE CAMPAIGN TREASURER NAME**☐ additional pages**COMMITTEE CAMPAIGN TREASURER ADDRESS****17 CONTRIBUTION  
TOTALS**1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN  
PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$

0.00

2. TOTAL POLITICAL CONTRIBUTIONS  
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$

13,816.00

**EXPENDITURE  
TOTALS**

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$

0.00

4. TOTAL POLITICAL EXPENDITURES

\$

9,169.38

**CONTRIBUTION  
BALANCE**5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE  
LAST DAY OF THE REPORTING PERIOD

\$

15,952.93

**OUTSTANDING  
LOAN TOTALS**6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE  
LAST DAY OF THE REPORTING PERIOD

\$

0.00

**18 AFFIDAVIT****NORMA J. VAQUERA**

Notary Public

STATE OF TEXAS

Commission Exp. 06-20-2013

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Amadeo Ortiz, this the 14 day  
of January, 20 10, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Norma J Vaquera

Print name of officer administering oath

Notary

Title of officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #  
Schedule: 1/11 Report: 3/22

2 FILER NAME Ortiz, Amadeo (Mr.)

3 ACCOUNT # (Ethics Commission filers)  
00000001

4 Date 12/04/2009 5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Acevedo, Rochelle (Ms.)

7 Amount of contribution (\$) 8 In-kind contribution description (if applicable)

12/04/2009

6 Contributor address; City; State; Zip Code  
1422 Buena Vista Street  
San Antonio, TX 78207

\$150.00

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date 12/04/2009 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Bennett, Ronald (Mr.)

Amount of contribution (\$) In-kind contribution description (if applicable)

12/04/2009

Contributor address; City; State; Zip Code  
23450 Canyon Bridge  
San Antonio, TX 78258

\$150.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 11/20/2009 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Carver, Thomas (Mr.)

Amount of contribution (\$) In-kind contribution description (if applicable)

11/20/2009

Contributor address; City; State; Zip Code  
12830 Kelly Road  
San Antonio, TX 78002

\$50.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 11/20/2009 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Cervantex, Charlie (Mr.)

Amount of contribution (\$) In-kind contribution description (if applicable)

11/20/2009

Contributor address; City; State; Zip Code  
18380 South Jett Road  
San Antonio, TX 78264

\$50.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 11/20/2009 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Contreras, Larry (Mr.)

Amount of contribution (\$) In-kind contribution description (if applicable)

11/20/2009

Contributor address; City; State; Zip Code  
222 Venice  
San Antonio, TX 78201

\$50.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/11 Report: 4/22	
2 FILER NAME Ortiz, Amadeo (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date  11/20/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Crawford, Leonard (Mr.)  6 Contributor address; City; State; Zip Code 12830 Kelly Road San Antonio, TX 78002	7 Amount of contribution (\$)  \$50.00	8 In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  11/20/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cruz, John (Mr.)  Contributor address; City; State; Zip Code 1206 Farnsworth Drive San Antonio, TX 78253	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  12/04/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Davis, Cedillo & Mendoza, Inc.- Attorneys at Law  Contributor address; City; State; Zip Code McCombs Plaza Suite 500 755 East Mulberry Avenue San Antonio, TX 78212	Amount of contribution (\$)  \$500.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  08/19/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Deputy Sheriff's Association of Bexar County Political Action Committ  Contributor address; City; State; Zip Code 816 Camaron Street Suite 214 San Antonio, TX 78212-5106	Amount of contribution (\$)  \$1,000.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  11/20/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dovalina, Roger  Contributor address; City; State; Zip Code 9311 Moonlit Glade Helotes, TX 78023	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/11 Report: 5/22	
2 FILER NAME Ortiz, Amadeo (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date  11/23/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dovalina, Roger  6 Contributor address; City; State; Zip Code 9311 Moonlit Glade Helotes, TX 78023	7 Amount of contribution (\$)  \$500.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  12/04/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dovalina, Roger  Contributor address; City; State; Zip Code 9311 Moonlit Glade Helotes, TX 78023	Amount of contribution (\$)  \$150.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  11/23/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Eagle Bailbonds  Contributor address; City; State; Zip Code 2515 West Commerce Suite 1 San Antonio, TX 78207	Amount of contribution (\$)  \$200.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  11/20/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fernandez, Raul (Mr.)  Contributor address; City; State; Zip Code P O Box 83083 San Antonio, TX 78283	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  12/04/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fernandez, Raul (Mr.)  Contributor address; City; State; Zip Code P O Box 830411 San Antonio, TX 78283	Amount of contribution (\$)  \$150.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/11 Report: 6/22	
2 FILER NAME Ortiz, Amadeo (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date  11/20/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Franco, Hector (Mr.)  6 Contributor address; City; State; Zip Code 5206 Village Haven San Antonio, TX 78218	7 Amount of contribution (\$)  \$50.00	8 In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  11/23/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gabehart, Daniel (Mr.)  Contributor address; City; State; Zip Code 306 Bloomfield Drive San Antonio, TX 78228-2907	Amount of contribution (\$)  \$500.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  12/04/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gabehart, Daniel (Mr.)  Contributor address; City; State; Zip Code 306 Bloomfield Drive San Antonio, TX 78228-2907	Amount of contribution (\$)  \$150.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  12/04/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gamboa, Pete (Mr.)  Contributor address; City; State; Zip Code 746 McCauley San Antonio, TX 78221	Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  11/23/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Garcia, Rolando (Mr.)  Contributor address; City; State; Zip Code 800 Dolorosa #101 San Antonio, TX 78207	Amount of contribution (\$)  \$500.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #  
Schedule: 5/11 Report: 7/22

2 FILER NAME Ortiz, Amadeo (Mr.)

3 ACCOUNT # (Ethics Commission filers)  
00000001

4 Date  
12/04/2009

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Garza, George (Mr.)

6 Contributor address; City; State; Zip Code  
11230 West Avenue  
San Antonio, TX 78213

7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable)

\$150.00

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date  
11/20/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Gonzales, Felipe (Mr.)

Contributor address; City; State; Zip Code  
4914 Fairford Drive  
San Antonio, TX 78228

Amount of contribution (\$) | In-kind contribution description (if applicable)

\$50.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
12/04/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Griffin, Earl (Mr.)

Contributor address; City; State; Zip Code  
834 Las Puras  
San Antonio, TX 78245

Amount of contribution (\$) | In-kind contribution description (if applicable)

\$150.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
12/04/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Guerra, Lily (Ms.)

Contributor address; City; State; Zip Code  
5107 Queen Bless Ct  
San Antonio, TX 78228-2025

Amount of contribution (\$) | In-kind contribution description (if applicable)

\$300.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
12/04/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Isakson, Robert (Mr.)

Contributor address; City; State; Zip Code  
740 Museum Drive  
Mobile, AL 36608

Amount of contribution (\$) | In-kind contribution description (if applicable)

\$500.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 6/11 Report: 8/22	
2 FILER NAME Ortiz, Amadeo (Mr.)				3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date  11/20/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jones, William (Mr.)		7 Amount of contribution (\$)  \$50.00		8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 5206 Village Haven San Antonio, TX 78218		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date  12/04/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jordan, Debra (Mrs.)		Amount of contribution (\$)  \$150.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 171 Red Oak Court Seguin, TX 78155		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date  12/04/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lazarine, Ralph (Mr.)		Amount of contribution (\$)  \$150.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4510 Allegheny Drive San Antonio, TX 78229		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date  12/04/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Longoria, John (Mr.)		Amount of contribution (\$)  \$150.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1807 Peterson San Antonio, TX 78224		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date  11/20/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lopez, Ovidio (Mr.)		Amount of contribution (\$)  \$50.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2818 Burlington Drive San Antonio, TX 78245		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/11 Report: 9/22	
2 FILER NAME Ortiz, Amadeo (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date  12/04/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lorenz, Dianna (Ms.)  6 Contributor address; City; State; Zip Code 318 Stimmel Street San Antonio, TX 78227	7 Amount of contribution (\$)  \$50.00	8 In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  12/04/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martinez, Albert (Mr.)  Contributor address; City; State; Zip Code 627 West Olmos San Antonio, TX 78212	Amount of contribution (\$)  \$150.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  11/23/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mata, Martin (Mr.)  Contributor address; City; State; Zip Code 12445 West Groesenbacher Road San Antonio, TX 78245	Amount of contribution (\$)  \$500.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  12/04/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Minarich, Madonna (Ms.)  Contributor address; City; State; Zip Code 12123 Orchid Blossom Drive San Antonio, TX 78247	Amount of contribution (\$)  \$150.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  11/20/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pacheco, Frank (Mr.)  Contributor address; City; State; Zip Code 1610 Hildebrand San Antonio, TX 78201	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 8/11 Report: 10/22

2 FILER NAME Ortiz, Amadeo (Mr.)

3 ACCOUNT # (Ethics Commission filers)  
00000001

4 Date

11/20/2009

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Paniagua, Robert (Mr.)

6 Contributor address; City; State; Zip Code  
1182 Buckhorn Trail  
Pipe Creek, TX 78063

7 Amount of  
contribution (\$)

\$50.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

12/04/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Parkinson, Thomas (Mr.)

Contributor address; City; State; Zip Code  
8510 Branch Hollow  
Universal City, TX 78148

Amount of  
contribution (\$)

\$150.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/04/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Perez, Hector (Mr.)

Contributor address; City; State; Zip Code  
118 Sage Drive  
Universal City, TX 78148

Amount of  
contribution (\$)

\$200.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

11/20/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Perez, Joe (Mr.)

Contributor address; City; State; Zip Code  
506 Rayburn Drive  
San Antonio, TX 78221

Amount of  
contribution (\$)

\$50.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/04/2009

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Perez, Rene (Mr.)

Contributor address; City; State; Zip Code  
5507 San Benito  
San Antonio, TX 78228

Amount of  
contribution (\$)

\$150.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 9/11 Report: 11/22	
2 FILER NAME Ortiz, Amadeo (Mr.)				3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date  11/20/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Perez, Victor (Mr.)		7 Amount of contribution (\$)  \$50.00		8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 2903 East Ramblewood San Antonio, TX 78261		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date  12/04/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Perez, Victor (Mr.)		Amount of contribution (\$)  \$150.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2903 Ramblewood Street San Antonio, TX 78261		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date  11/23/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ramirez, Vicente (Mr.)		Amount of contribution (\$)  \$100.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1927 Flamingo San Antonio, TX 78209-2029		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date  12/04/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ramos, Carlos (Mr.)		Amount of contribution (\$)  \$201.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 409 North San Marcos San Antonio, TX 78607		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date  12/04/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rangel's Bonding Service		Amount of contribution (\$)  \$300.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 1323 Martin Street San Antonio, TX 78207		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				<b>1 PAGE #</b> Schedule: 10/11 Report: 12/22	
<b>2 FILER NAME</b> Ortiz, Amadeo (Mr.)				<b>3 ACCOUNT #</b> (Ethics Commission filers) 00000001	
<b>4 Date</b>  12/04/2009	<b>5 Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Roberts, Brian (Mr.) <hr/> <b>6 Contributor address; City; State; Zip Code</b> 10809 Westward Loop #230 San Antonio, TX 78254-5403	<b>7 Amount of contribution (\$)</b>  \$150.00	<b>8 In-kind contribution description (if applicable)</b>   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
<b>9 Principal occupation / Job title (See Instructions)</b>			<b>10 Employer (See Instructions)</b>		
<b>Date</b>  11/23/2009	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Rodriguez, Rudy (Mr.) <hr/> <b>Contributor address; City; State; Zip Code</b> 4310 Little Lane San Antonio, TX 78229	<b>Amount of contribution (\$)</b>  \$250.00	<b>In-kind contribution description (if applicable)</b>   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
<b>Principal occupation / Job title (See Instructions)</b>			<b>Employer (See Instructions)</b>		
<b>Date</b>  12/04/2009	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Rogers, Wes (Mr.) <hr/> <b>Contributor address; City; State; Zip Code</b> 2818 Falling Brook San Antonio, TX 78258	<b>Amount of contribution (\$)</b>  \$25.00	<b>In-kind contribution description (if applicable)</b>   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
<b>Principal occupation / Job title (See Instructions)</b>			<b>Employer (See Instructions)</b>		
<b>Date</b>  11/20/2009	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Salazar, Joe (Mr.) <hr/> <b>Contributor address; City; State; Zip Code</b> 511 Legacy Ridge San Antonio, TX 78260	<b>Amount of contribution (\$)</b>  \$50.00	<b>In-kind contribution description (if applicable)</b>   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
<b>Principal occupation / Job title (See Instructions)</b>			<b>Employer (See Instructions)</b>		
<b>Date</b>  11/23/2009	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Tafolla, Rolando (Mr.) <hr/> <b>Contributor address; City; State; Zip Code</b> 4226 Haven View San Antonio, TX 78228	<b>Amount of contribution (\$)</b>  \$40.00	<b>In-kind contribution description (if applicable)</b>   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
<b>Principal occupation / Job title (See Instructions)</b>			<b>Employer (See Instructions)</b>		

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 11/11 Report: 13/22	
2 FILER NAME Ortiz, Amadeo (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001	
4 Date  12/04/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tafolla, Rolando (Mr.)  6 Contributor address; City; State; Zip Code 4226 Haven View San Antonio, TX 78228	7 Amount of contribution (\$)  \$150.00	8 In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  12/04/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Texas GEO Group Political Action Committee  Contributor address; City; State; Zip Code 1583 Common Street Suite 213 New Braunfels, TX 78130	Amount of contribution (\$)  \$1,500.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  11/20/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Waits, Mark (Mr.)  Contributor address; City; State; Zip Code 3513 Davenport Schertz, TX 78154	Amount of contribution (\$)  \$50.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  12/04/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wells, Joanne (Ms.)  Contributor address; City; State; Zip Code 9515 FM 1863 San Antonio, TX 78266	Amount of contribution (\$)  \$3,000.00	In-kind contribution description (if applicable)   (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 1/9 Report: 14/22**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)  
00000001

<b>4</b> Date  09/14/2009	<b>5</b> Payee name Aquillon Golf Classic  ..... <b>6</b> Payee address; City; State; Zip Code P O Box 120278 San Antonio, TX 78212	<b>7</b> Amount (\$)  \$250.00
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**8** Purpose of payment (See instructions regarding type of information required.)  
Non-Profit Golf Tournament - Hole Sponsor**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:  
Office held:

Date  07/08/2009	Payee name Chester's Hamburgers  ..... Payee address; City; State; Zip Code 15321 San Pedro San Antonio, TX 78232	Amount (\$)  \$39.67
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Purpose of payment (See instructions regarding type of information required.)  
F & B - Volunteer Meeting for Xmas Dance\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:  
Office held:

Date  07/10/2009	Payee name Exxon Mobil  ..... Payee address; City; State; Zip Code 15058 Main Street Lytle, TX 78052	Amount (\$)  \$4.76
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Purpose of payment (See instructions regarding type of information required.)  
Fuel Purchase - Moving Campaign Signs to Storage\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:  
Office held:

Date  10/26/2009	Payee name Finck Cigar Company  ..... Payee address; City; State; Zip Code 414 Vera Cruz San Antonio, TX 78283	Amount (\$)  \$120.99
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Purpose of payment (See instructions regarding type of information required.)  
Cigars for Puro Smoke-Out Fund Raiser\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:  
Office held:

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/9 Report: 15/22
2 FILER NAME Ortiz, Amadeo (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001
4 Date  11/09/2009	5 Payee name Freddy's Mexican Restaurant  6 Payee address; City; State; Zip Code 1201 South Flores San Antonio, TX 78204	7 Amount (\$)  \$20.00
8 Purpose of payment (See instructions regarding type of information required.) F & B - Campaign Meeting-Victor Perez  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date  10/26/2009	Payee name HEB Grocery  Payee address; City; State; Zip Code 9900 Wurzbach San Antonio, TX 78230	Amount (\$)  \$27.48
Purpose of payment (See instructions regarding type of information required.) F & B - Bar Mixers for Texas Hold'em Fund Raiser  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date  10/27/2009	Payee name HEB Grocery  Payee address; City; State; Zip Code 2118 Fredericksburg Road San Antonio, TX 78201	Amount (\$)  \$79.05
Purpose of payment (See instructions regarding type of information required.) F & B - Supplies for Puro Smoke-Out Fund Raiser  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date  07/07/2009	Payee name Hispanic American Police Command Officers Association  Payee address; City; State; Zip Code P O Box 831544 San Antonio, TX 78283	Amount (\$)  \$175.00
Purpose of payment (See instructions regarding type of information required.) Annual Fund Raiser - San Antonio Chapter Comedy Show  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:

**POLITICAL EXPENDITURES****SCHEDULE F**The **INSTRUCTION GUIDE** explains how to complete this form.**1** PAGE #  
Schedule: 3/9 Report: 16/22**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)  
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<b>4</b> Date  10/16/2009	<b>5</b> Payee name HKG Duty Free Store  ..... <b>6</b> Payee address; City; State; Zip Code 1210 Water Street Laredo, TX 78040	<b>7</b> Amount (\$)  \$74.80
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**8** Purpose of payment (See instructions regarding type of information required.)

F &amp; B - Puro Smoke-Out Fund Raiser

(If travel outside of Texas, complete Schedule T) ☐**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:Office sought:  
Office held:

Date  10/14/2009	Payee name Hope 4 Heroes/Veterans Parade  ..... Payee address; City; State; Zip Code 12274 Bandera Road Helotes, TX 78023	Amount (\$)  \$30.00
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Purpose of payment (See instructions regarding type of information required.)

Donation - VFW Parade Non Profit Organization

(If travel outside of Texas, complete Schedule T) ☐\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:Office sought:  
Office held:

Date  10/23/2009	Payee name Karma San Antonio  ..... Payee address; City; State; Zip Code 8123 Broadway San Antonio, TX 78209-2039	Amount (\$)  \$250.00
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Purpose of payment (See instructions regarding type of information required.)

Donation for Non-Profit Organization

(If travel outside of Texas, complete Schedule T) ☐\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:Office sought:  
Office held:

Date  10/26/2009	Payee name Las Palapas  ..... Payee address; City; State; Zip Code 8005 Callaghan Road San Antonio, TX 78230	Amount (\$)  \$45.17
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Purpose of payment (See instructions regarding type of information required.)

F &amp; B - Meeting w/National Night Out Volunteers

(If travel outside of Texas, complete Schedule T) ☐\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:Office sought:  
Office held:



**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/9 Report: 17/22
2 FILER NAME Ortiz, Amadeo (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001
4 Date  11/09/2009	5 Payee name Luciano Restaurant  Payee address; City; State; Zip Code 849 East Commerce Street San Antonio, TX 78205	7 Amount (\$)  \$128.03
8 Purpose of payment (See instructions regarding type of information required.) F & B - Volunteer Luncheon for Staff  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date  11/06/2009	Payee name Meachum, Martin (Mr.)  Payee address; City; State; Zip Code 26151 Meadow Lark Bay San Antonio, TX 78260	Amount (\$)  \$90.42
Purpose of payment (See instructions regarding type of information required.) Reim for F & B for Texas Hold'em Tournament  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date  10/26/2009	Payee name Monarch Trophies  Payee address; City; State; Zip Code 2121 Northwest Military Drive San Antonio, TX 78023	Amount (\$)  \$201.90
Purpose of payment (See instructions regarding type of information required.) Trophies for Texas Hold'em Tournament  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date  09/23/2009	Payee name Northwest Democrats  Payee address; City; State; Zip Code P O Box 831486 San Antonio, TX 78268	Amount (\$)  \$100.00
Purpose of payment (See instructions regarding type of information required.) Advertising 1/2 Page Ad - Banquet Program  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 5/9 Report: 18/22**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)  
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<b>4</b> Date  10/08/2009	<b>5</b> Payee name Office Max  ..... <b>6</b> Payee address; City; State; Zip Code 255 East Bass Road -S-1510 San Antonio, TX 78209	<b>7</b> Amount (\$)  \$12.96
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**8** Purpose of payment (See instructions regarding type of information required.)  
Office Supplies**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:  
Office held:

Date  08/07/2009	Payee name Ortiz, Alma (Ms.)  ..... Payee address; City; State; Zip Code 802 King Avenue San Antonio, TX 78211	Amount (\$)  \$1,000.00
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Purpose of payment (See instructions regarding type of information required.)  
Payment of Campaign Loan**\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\***  
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:  
Office held:

Date  09/22/2009	Payee name Paul Elizondo Campaign  ..... Payee address; City; State; Zip Code P O Box 8490 San Antonio, TX 78208	Amount (\$)  \$250.00
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Purpose of payment (See instructions regarding type of information required.)  
Campaign Contribution**\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\***  
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:  
Office held:

Date  10/15/2009	Payee name Personal Pantry Catering  ..... Payee address; City; State; Zip Code 1914 Fredericksburg Road San Antonio, TX 78201	Amount (\$)  \$2,971.82
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Purpose of payment (See instructions regarding type of information required.)  
F & B - Catering for a Texas Hold'em Poker Tournament**\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\***  
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:  
Office held:

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 6/9 Report: 19/22**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)  
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<b>4</b> Date  12/07/2009	<b>5</b> Payee name San Antonio Fire Fighters Banquet Hall  <b>6</b> Payee address; City; State; Zip Code 8925 West IH 10 West San Antonio, TX 78230	<b>7</b> Amount (\$)  \$800.00
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**8** Purpose of payment (See instructions regarding type of information required.)  
Rental of Hall for Christmas Dance**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:  
Office held:

Date  12/07/2009	Payee name San Antonio Fire Fighters Banquet Hall  Payee address; City; State; Zip Code 8925 West IH 10 West San Antonio, TX 78230	Amount (\$)  \$800.00
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Purpose of payment (See instructions regarding type of information required.)  
Rental of Hall for Texas Hold'em Tournament on 10/22/09\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:  
Office held:

Date  10/20/2009	Payee name San Antonio Hispanic Police Officers Association  Payee address; City; State; Zip Code P O Box 830716 San Antonio, TX 78283	Amount (\$)  \$100.00
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Purpose of payment (See instructions regarding type of information required.)  
Donation - Hole Sponsor for Golf Tournament\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:  
Office held:

Date  12/28/2009	Payee name Texas Ethics Commission  Payee address; City; State; Zip Code P O Box 12070 Capital Station Austin, TX 78711-2070	Amount (\$)  \$1,000.00
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Purpose of payment (See instructions regarding type of information required.)  
Civil Penalty - SC 2809329 Order & Agreed Resolution\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:  
Office held:

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 7/9 Report: 20/22**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)  
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<b>4</b> Date  10/08/2009	<b>5</b> Payee name The Palm Restaurant  ..... <b>6</b> Payee address; City; State; Zip Code 233 East Houston Street San Antonio, TX 78205	<b>7</b> Amount (\$)  \$61.58
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<b>8</b> Purpose of payment (See instructions regarding type of information required.) F & B - Meeting w/Bill Gohlson & Nina Duron from La Prensa  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<b>9</b> ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
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Date  08/29/2009	Payee name Toudouze Market  ..... Payee address; City; State; Zip Code 800 Buena Vista San Antonio, TX 78207	Amount (\$)  \$49.90
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Purpose of payment (See instructions regarding type of information required.) F & B - Water for Volunteers  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
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Date  10/26/2009	Payee name Toudouze Market  ..... Payee address; City; State; Zip Code 800 Buena Vista San Antonio, TX 78207	Amount (\$)  \$135.15
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Purpose of payment (See instructions regarding type of information required.) F & B - Supplies for Texas Hold'em Tournament  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
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Date  10/06/2009	Payee name U S Postal Service  ..... Payee address; City; State; Zip Code 1064 Vance Jackson San Antonio, TX 78201	Amount (\$)  \$88.00
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Purpose of payment (See instructions regarding type of information required.) Postage Stamps  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
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**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/9 Report: 21/22
2 FILER NAME Ortiz, Amadeo (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00000001
4 Date  07/02/2009	5 Payee name Wachovia Bank  6 Payee address; City; State; Zip Code 7550 I H 10 West, #150 San Antonio, TX 78229	7 Amount (\$)  \$17.95
8 Purpose of payment (See instructions regarding type of information required.) Bank Service Fees  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date  08/04/2009	Payee name Wachovia Bank  Payee address; City; State; Zip Code 7550 I H 10 West, #150 San Antonio, TX 78229	Amount (\$)  \$17.95
Purpose of payment (See instructions regarding type of information required.) Bank Service Fees  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date  09/03/2009	Payee name Wachovia Bank  Payee address; City; State; Zip Code 7550 I H 10 West, #150 San Antonio, TX 78229	Amount (\$)  \$17.95
Purpose of payment (See instructions regarding type of information required.) Bank Service Fees  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:
Date  10/02/2009	Payee name Wachovia Bank  Payee address; City; State; Zip Code 7550 I H 10 West, #150 San Antonio, TX 78229	Amount (\$)  \$72.95
Purpose of payment (See instructions regarding type of information required.) Bank Service Fees  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 9/9 Report: 22/22**2** FILER NAME Ortiz, Amadeo (Mr.)**3** ACCOUNT # (Ethics Commission filers)  
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<b>4</b> Date  11/03/2009	<b>5</b> Payee name Wachovia Bank  ..... <b>6</b> Payee address; City; State; Zip Code 7550 I H 10 West, #150 San Antonio, TX 78229	<b>7</b> Amount (\$)  \$17.95
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**8** Purpose of payment (See instructions regarding type of information required.)  
Bank Service Fees(If travel outside of Texas, complete Schedule T) ☐**9** \*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:Office sought:  
Office held:

Date  12/02/2009	Payee name Wachovia Bank  ..... Payee address; City; State; Zip Code 7550 I H 10 West, #150 San Antonio, TX 78229	Amount (\$)  \$17.95
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Purpose of payment (See instructions regarding type of information required.)  
Bank Service Fees(If travel outside of Texas, complete Schedule T) ☐\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:Office sought:  
Office held:

Date  09/17/2009	Payee name Walter Serna Campaign for Rey Feo  ..... Payee address; City; State; Zip Code 126 Villita San Antonio, TX 78205	Amount (\$)  \$100.00
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Purpose of payment (See instructions regarding type of information required.)  
Donation to Non-Profit Organization(If travel outside of Texas, complete Schedule T) ☐\*\* Complete if direct expenditure to benefit Candidate/Officeholder \*\*  
Candidate / Officeholder name:Office sought:  
Office held: